

Foster Family Home - Corrective Action Report

Provider ID: 1-511908

Home Name: Bernadette Velasco, RN

Review ID: 1-511908-6

91-1030 Kaiohee Street

Reviewer: Maribel Nakamine

Ewa Beach HI 96706

Begin Date: 10/14/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home inspection for a 2 person CCFFH recertification made on 10/14/19.

Home is in compliance with all requirements. Home will receive a 2 bed certification.

Maribel Nakamine, RN

Compliance Manager

10/14/19

Date

[Signature]

Primary Care Giver

10/14/19

Date